PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

Elicolive duridaly 1, 2000								106066				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	mty	OR	OTHER SMALL	
TOTAL CLAIMS			74					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	Basic Fee	750.00
TOTAL CHARGEABLE CLAIMS			-/L minus 20=		· (1)			X\$ 9=		OR	X\$18=	972-
INDEPENDENT CLAIMS								X42=		OR	X84=	84-
MULTIPLE DEPENDENT CLAIM PI			RESENT					+140=	·		+280=	8.7
* If the difference in column 1 is less than zero, enter "0" in column 2							-			OR	TOTAL	190
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						<u>.</u>	SMALL I	ENTITY	OR OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	-	مر	= 0		X\$ 9=	1	OR	X\$18=	
	Independent	• /	Minus	***				X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	+140=		OR	+280=	
						•		TOTAL	/	00	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			addit. Fee	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	•
	Independent	*	Minus	***		=	$\ \ $	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		J	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	= .	(Colu	The state of the s	(Column 3)			•			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		2	Ш	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 -15	<u> -</u>		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL	
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											
	The "Highest Nun	nber Previously Pa	id For" (Total o	r independ	ent) is the	e nighest numb	er fou	ind in the app	propriate box	k in co	lumn 1.	